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**APPLICANTS**  
 Robert Francis de Sylva, Santa Monica, CA;

**\*\* CONTINUING DATA \*\*\*\*\*** *SSP*  
*None*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *SSP*  
*None*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
 \*\* 02/09/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 44	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>SSP</i>				

**ADDRESS**  
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**TITLE**  
 System and method for facilitating monetary transactions

<b>FILING FEE RECEIVED</b> 687	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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